

3. Non-Emergency Medically Necessary Transportation

3.1 Who is Covered for Non-Emergency Medically Necessary Transportation

Adult care home residents who are eligible for "regular" Medicaid (blue MID card) qualify for Medicaid coverage of Non-Emergency Medically Necessary Transportation, provided by the home's staff or others under arrangement with the home, to receive health care services.

3.2 What is Covered

Although family members are encouraged to provide transportation whenever possible, you are responsible for providing or arranging Non-Emergency Medically Necessary Transportation to health care services as needed by the resident in accordance with the licensure rules by which your home is licensed. You may provide Non-Emergency Medically Necessary Transportation for residents using your own vehicle or contract with other providers, including county coordinated transportation systems.

Note: Ambulance transportation is covered by Medicaid for medical emergencies. Medicaid will also cover non-emergency ambulance transportation when any other means of transportation would endanger the resident's health and it is medically necessary that the individual be transported via stretcher due to a medical/physical condition. Ambulance service providers enroll with Medicaid and are reimbursed directly for providing ambulance transportation for Medicaid recipients.

3.3 How Is It Paid

Under Non-Emergency Medically Necessary Transportation, the adult care home may bill for and receive a fixed daily payment for each date of service the resident resides in the home or the resident is on Medicaid-covered therapeutic leave. Guidance on filing claims for payment is in Section 11.

3.4 Limitations on Coverage

- **Prior Approval:**

You are not required to get authorization from Medicaid before you provide or bill for providing Non-Emergency Medically Necessary Transportation for a resident.

- **Copayment:**

You may not require a copayment from residents or their families for providing Non-Emergency Medically Necessary Transportation.

- **Therapeutic Leave:**

Medicaid will cover Non-Emergency Medically Necessary Transportation on dates of service that a resident is taking Medicaid-covered therapeutic leave from the home. For additional information about therapeutic leave, see Section 7.4.

3.5 Documentation Requirements

Adult care homes are required by law to determine and document the actual time spent and costs of providing Non-Emergency Medically Necessary Transportation for residents. These records are subject to review and audit by the Division of Medical Assistance (DMA) or its agents. The

Non-Emergency Medically Necessary Transportation Travel Log in Appendix E was designed to record trips and determine costs of furnishing this service. Instructions for completing the Non-Emergency Medically Necessary Transportation Travel Log are in Appendix F. For further information about documenting Non-Emergency Medically Necessary Transportation and maintaining travel logs, see Section 10.